PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS **EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. **UNITED STATES HOUSE OF REPRESENTATIVES** IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offening during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. in the current calendar year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction Name: 2018 FINANCIAL DISCLOSURE STATEMENT **C.** Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? E. Did you hold any reportable positions during the reporting period or reporting period? exceeding \$1,000 during the reporting period? A. Did you, your spouse, or your dependent child: REPORT TYPE STATUS b, Receive more than \$200 in uneamed income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the FLER end of the reporting period? or asset during the reporting period? homas House of Representatives 2018 Annual (Due: May 15, 2019) Member of the U.S. State: District: ۸ Yes Yes Yes × Yes Yes \leq Daytime Telephone: Š Z o Amendment Š 8 8 For Use by Members, Officers, and Employees X × G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? lieu of paying you for a speech, appearance, or article during the reporting period? reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period? Did any individual or organization make a donation to charity in ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" H. Did you, your spouse, or your dependent child receive any Form A Employee Officer or **Employing Office** Date of Termination: Termination A \$200 penalty shall be assessed against any individual who files more than 30 days late. 102017 MAY 15 AN 9: 05 (Office Use Only) LEGISLATIVE RESOURCE CERTER S. HOUSE OF REPOSE DELIVERED age 1 of 9 Shared Staff Filer Type: (If Applicable) E REPRESE WATER Yes. Yes Yes • Yes Yes Yes Yes Principal Assistant Š ö Š Ö 중 Š S X X

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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			Citie	1	17ental		Examples:	क्ष	For bank and other cash accounts. If list every financial institution will steep financial individual state. For an ownership interest is not publicly traded, is business, the nature of its activitiones and vacation hones and vacation hones and vacation hones and vacation hones come during the reportings (in come during the reportings (in come during the reportings) financial program, including the figure portion a privately-traded finvestment Fund, please checking the source is through the figure of the source is the figure of the source is the fire of the source is the source is the fire of the source is the source i	all (RAs and (k) plans) prov	Assets and/or Incomplete in the production of income and with exceeding \$1,000 at the end of and (b) any other reportable asset that generated more than \$200 during the year. Provide complete names of stock (do not use only ticker symbols),
			Bunk IRA	eno	Propertyin	ABC Hedge Fund	Simon & Schuster	Mega Corp. Stock	For bank and other cash accounts, total the amount in all Interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second thones and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you report a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box. If you so choose, you may Indicate that an asset or income source is that of your spouse (SP) or dependent chird (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction bookdet.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that expends the recording these holds.	Assets and/or Income Sources Identify (a) each asset held for investment or production of income and with a fair market value sxceeding \$1,000 at the end of the reporting pendo, and (b) any other reportable asset or source of income that generated more than \$200 in "unearmed" income during the year. Provide complete names of stocks and multual funds (do not use only ticker symbols).
\vdash						×	-	=	None & PREER FASS EX BOS	T-	
				<u> </u>					A/A/AA	,	Indicate valuation used. If an as because *Column you haw
				L			indefinite		\$1,001-\$15,000	,	indicate value of as valuation method off used. If an asset was sol because it generated "Column M is for assyou have no interest
			×				ite		\$15,001-\$50,000	·	Value of Asset Value of Asset Value of Asset Indicate value of asset at dose of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." *Column M is for assets held by your spouse or dependent child in which you have no interest.
								×	\$50,001-\$100,000	1	Vall at do nan fa men f
				Ŀ	×				\$100,001-\$250,000 -	1	Value of Asset Value of Asset dose of the report an fair market value, ing the reporting perse, the value should by your spouse or
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									Spouse/DC Asset over \$1,000,000°	_	
			×		L	ļ	_	<u> </u>	NONE	4	Type of Income Check all colums that apply. For generate tax-deferred income (such a 529 accounts), you may check the column. Dividends, interest, and cay if retirvested, must be disclosed assets held in taxable accounts. Check the country of the asset generated no income during the
		<u> </u>				<u> </u>		×	DIVIDENDS		ate transcount not be transcou
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						L			INTEREST	_	Typ orred you nds, L no in
									CAPITAL GAINS		that a incommand may
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									TAX-DEFERRED		9.7 <u>6</u> 5.7 5. 34
						Partnership Income	Royalties	:	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		Type of Incorne Check all columns that apply, For accounts that generate tax-deferred income (auch as 401(k), IRA, or 529 accounts), you may check the "fax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.
			×						None -	- [For a may categ Divid must acco
						L			\$1-\$200	_	innex ich you
		Ĺ	Ĺ		×		×		\$201-\$1,000	=	Amount Amount Amount For assets for which you chee may check the "None" column category of income by che Dividends, interest, and ca must be disclosed as Inco accounts. Check "None" if in "Column XII is for assets held in which you have no interest.
		L				L		×	\$1,001-\$2,500	₹ .	All hich y None ome west, seed of the rass, teno
		_				×	$oxedsymbol{oxed}$	Ŀ	\$2,501-\$5,000	<	Amount of Income hy you checked "Tax-Defen ne" column. For ell other e by checking the appropriate that a large for assets held by your spouse or interest.
		L							\$5,001-\$15,000	≤	Int of In necked Talmn. For a hecking the capital g capital ca
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				L		$oldsymbol{oldsymbol{oldsymbol{eta}}}$			Over \$5,000,000	¥	Amount of Income Amount of Income Amount of Income Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For ell other assets indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if relirvested, must be disclosed as Income for assets held in taxable accounts. Check "None" if no income was earned or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest.
						_		_		≦	
		1						S(part)	Leave this column blank if there are no transactions that exceeded \$1,000.	please indicate as follows: (S (part)).	Transaction indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period. If only a portion of an asset was sold.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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																ASSET NAME		BLOCK A Assets and/or Income Sources
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				\vdash		-												BLOCK B Value of Asset
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																	CAPITAL GAINS	BLOCK C
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								ŀ									TAX-DEFERRED	BLOCK C
																	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
						İ		İ									None	
				T		1	T	T		1				<u> </u>			\$1-\$200 =	
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	-	\vdash	-	╫	-	-	\vdash	\vdash	-	-	-	-	-	-	-		\$1,000,001-\$5,000,000 ×	
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SCHEDULE B - TRANSACTIONS

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													SP	SP.DC,JT	Capital Gocheck the disclose the	Exclude tra purchase or only a porti transaction.	dependent	Report any
													Example		ains: If a sa "capital gain e capital gai	ransactions or sale of your dion of an analysis	child for inve	y purchase,
													Mega Corp. Stock	Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. *Column K is for assets solely held by your spouse or dependent child.	Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	y security or real property held by you, your sestment or the production of income. Include to	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the
															xcess of \$200, d account, and	hildren, or the ntal income. If as the type of	ransactions that	d \$1,000 in the
	•														Purchase			<u>,</u>
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													×		Partial Sale			Type of Transaction
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					<u> </u>		 						L		Over \$50,000		د	
L													L		Over \$1,000,0 (Spouse/DC /		~	

SCHEDULE C - EARNED INCOME

Name:
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Page S of 4

source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting peric	
	g the reporting period. For a spouse, list	

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fluciary relationship are dually prohibited. Source (include date of receipt for honoraria) Examples: Control County Beard of Education Control County Beard of Education County Beard of Education Control County Beard of Education Coun	y relationship) are totally prohibited. Type Approved Teaching Fee Legislative Person Spouse Speech Spouse Salary Approved Teaching Fee Legislative Parson Spouse Salary Approved Teaching Fee Legislative Parson Spouse Salary	\$28,050. The 2019 limit is \$28,440. Amount \$6,000 \$13,000 \$1,000 N/A / 500

SCHEDULE D - LIABILITIES

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	Name: T
	& tail Emma
	Page 6 of 9

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

!						0	.*	
						SP. DC, JT		
			8	Klein	Example			
		•	Bonk of Mobile Hair, MN	Klein Bank, Victoria UN	First Bank of Wilmington, DE	Creditor		
			6/13	5/07	5/16	Date Liability Incurred MO/YR		
			Note	Mortgage on Primary Residence	Mortgage on Rental Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
						\$15,001- \$50,000	œ	
						\$50,001- \$100,000	c	
			×	×	×	\$100,001- \$250,000	0	
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						\$1,000,001- \$5,000,000	G	ability
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						\$25,000,001- \$50,000,000	_	
						Over \$50,000,000	_	
						Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

			Position
			7
			Name of Organization
		:	

SCHEDULE F - AGREEMENTS

Name: Mount For I tune Tr. Page 7 of 9	
eement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave or absence during the period of government or continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former

Date	Parties to Agreement	Terms of Agreement

SCHEDULE G – GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

			Example:	
	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		Mr. Joseph Smith, Arlington, VA	Source
			Silver Platter (prior determination of personal friendship received from the Committee on Effics)	Description
			\$400	Value

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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	Page 8 of 9

were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Covernment of China (MECEA)	Aug. 6-11	DC-Bejing, China-DC	۲	*	N
Exampres:	Habitat for Humanity (charity fundraiser)	Mar. 3-4	DC-Boston-DC	۲	Y	Υ
			9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9			
			-		.	

SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: Thomas Farl Eures Page q of q

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	an event to a charitable organization	n in lieu of paying an honora	rium to you. A separate
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2018	\$2,000
L	Article	Aug. 13, 2018	\$500
		a Part	